Community Pharmacy
NHS Lanarkshire
29th June Update

Are you an independent prescriber? Recent prescribing reports have shown an increase in prescribing for several conditions that **do not** fall under the scope of the Pharmacy First Plus service:

- period delay
- erectile dysfunction
- Vaccinations
- Urgent access to medicines
- Items of low clinical value

It should also be noted that we have seen an increase in NRT products, Varenicline & Levonorgestrel/Uripristal being issued via the Pharmacy First Plus service; please remember **smoking cessation & Emergency Hormonal Contraception sits under the Public Health Service** section of the national contract **not Pharmacy First.** Please see attached CPIP newsletter for more info on February's CPIP prescribing.

We are aware CPS, NES and Pharmacy in Practice run a variety of peer / educations sessions, would sessions like this be beneficial at board level? Or is there anything else we could do to support your prescribing / Pharmacy First Plus service? Please submit and feedback / comments to ellenjo.fowler@lanarkshire.scot.nhs.uk

Do you supply MAR charts? You may be aware that the MAR Service Level Agreement has been under review in regard to content and finances. This has now been agreed with Community Pharmacy Lanarkshire. A draft copy of content is attached to aid understanding of roles and responsibilities of HSCPs/CPs going forward. A final copy will be circulated to contractors for sign up shortly. Contact details for each of the locality social care teams is also available within the SLA. The service fee will also increase from £10 > £25. We await final confirmation from the HSCPs in regard to how invoices are to be sent going forward however in the meantime please continue to invoice using the current form. Payments will be backdated once new invoicing agreement in place.

Are you aware of the Dapagliflozin script switch? During Q2 of the financial year**,** NHS Lanarkshire will commence switching branded and non-formulary SGLT2 inhibitors to formulary choice generic dapagliflozin. Studies suggest there is no clinical superiority among SGLT2 inhibitors and SMC restrictions on use of branded dapagliflozin and empagliflozin (Forxiga and Jardiance respectively) are the same. While other SGLT2 inhibitors are contraindicated in severe hepatic impairment, dapagliflozin may be used at a reduced dose of 5mg. Dapagliflozin is the only SGLT2 inhibitor that is available generically and is included in Part 7 of the Scottish Drug Tariff. Comms will be shared with patients; *We are currently carrying out a review of our patients prescribed XXXXXX This will now change to:* ***< Dapagliflozin yyyymg, dose of yyyyyy>*** *in line with NHS Lanarkshire prescribing recommendations, and is supported by our local cardiology, renal and diabetes*

specialists. This has a very similar effect to your current prescribed medication. We have updated your repeat list to reflect this change. Please finish your current supply of xxxxxx before starting yyyyyy and do not use both at the same time. The date of your next planned review should not need to change due to this change in your prescription.

Invokana 100mg Tablets Invokana 300mg Tablets Canagliflozin 100mg Tablets Canagliflozin 300mg Tablets Jardiance 10mg Tablets Jardiance 25mg Tablets Empagliflozin 10mg Tablets Empagliflozin 25mg Tablets Forxiga 10mg Tablets	Dapagliflozin 10mg tablets
Forxiga 5mg Tablets	Dapagliflozin 5mg Tablets

Exclusions

- Patients < 18 years old
- Circumstances that deem change of medication inappropriate at this time
- Forxiga prescribed for chronic kidney disease **without** type 2 diabetes mellitus (protected indication for Forxiga as per SMC)
- History of adverse reaction or intolerance to dapagliflozin
- Patient with an eGFR less than 15 ml/min (CKD stage 5), on dialysis or a history of renal transplant
- Not prescribed in the most recent 6 months

Items above Drug Tariff? We are getting increased reports again of CPs not supplying patients with meds as the items is above the drug tariff. CPs are requesting prescribers provide alternatives as the item is out of stock. Please review attached paper which outlines the Community Pharmacy Scotland & Primary Care Community Pharmacy Group **Medicines Shortages Guidance:**

1. Ensure continuity of care to the patient
2. Collect pricing information from your supplier
3. Submit information via the CPS Shortage Reporter

Do you dispense Creon? As you are aware due the Creon shortages no authorisation was required for specials for Creon until the end of June 2026. Due to the ongoing supply issues this has been **extended until the 29th January 2027.** Community pharmacies are asked to source the most cost effective supply available.

Do you use the P2P line? Or do OOHs send you scripts via email? Just a reminder that that if you receive a script from OOHs and the item is not in stock,

please do not advise the patient to call 111. Please call the P2P line who will be able to provide you will an alternative if appropriate.

Do you have any feedback for the Hospital at home service? We are collating feedback re the comms between Hospital at Home and Community Pharmacy. If you have any feedback please submit to ellenjo.fowler@lanarkshire.scot.nhs.uk. **Please note, Hospital at Home has recently introduced their service to the Camglen area.**

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Paediatric labels are changing. ACTION REQUIRED!!! In light of the new NPPG labelling advice for paediatrics acute sites are adjusting their labelling processes to ensure they are complying with NPPG. This mainly involves removing mg for the dose and having the volume only. Please review this guidance to align practices across Primary Care, Secondary Care and **Community Pharmacy**; https://nppg.org.uk/wp-content/uploads/2026/02/Labelling-Position-Statement-V2.pdf

Do you know what Consultant Connect is? NHS Lanarkshire currently has 30 Community Pharmacy sites piloting Consultant Connect. Consultant Connect is a professional line that Community Pharmacies can use in hours, when the P2P line is unavailable, supporting Community Pharmacy teams with clinical decisions and navigation of patients in hours. Similar to the P2P line, Consultant Connect can be used for when:

- A patient requires **same-day urgent care** that is not life threatening
- A patient falls out with a PGD
- A Pharmacist requires clinical advice to support Independent Prescribing
- A patient has been assessed by the CP as needing a **same day GP appointment** but no appointments are available and/or GP does not offer same day appointments. If the patient requires a routine and/or non-urgent appointment they should be directed to contact their own GP.
- A patient may have otherwise attended A&E for an non-life-threatening condition

Have you seen the updated Pharmacy First Approved list? Please find the link below to the most recent PF Approved List valid from 1st June 26. Microsoft Word - Approved List V41 - from 1 June 2026

Have you seen the updates to the SIGN 155 Pharmacological Management of Migraine guidelines? The SIGN 155 Pharmacological Management of Migraine guideline has been updated and is now available on the SIGN website. The guideline was published in 2018 and updated most recently in May 2026. It will be considered for review in three years. The evidence-based guideline provides information on key recommendations for:

- acute treatment;
- prevention of migraine;
- medication-overuse headache.

Dispensed an electronic copy of a script but still waiting for the paper copy? Please remember, prescribers should provide a written prescription within 72 hours, if you are missing paper copies please ensure you are directing missing script requests to the appropriate teams:

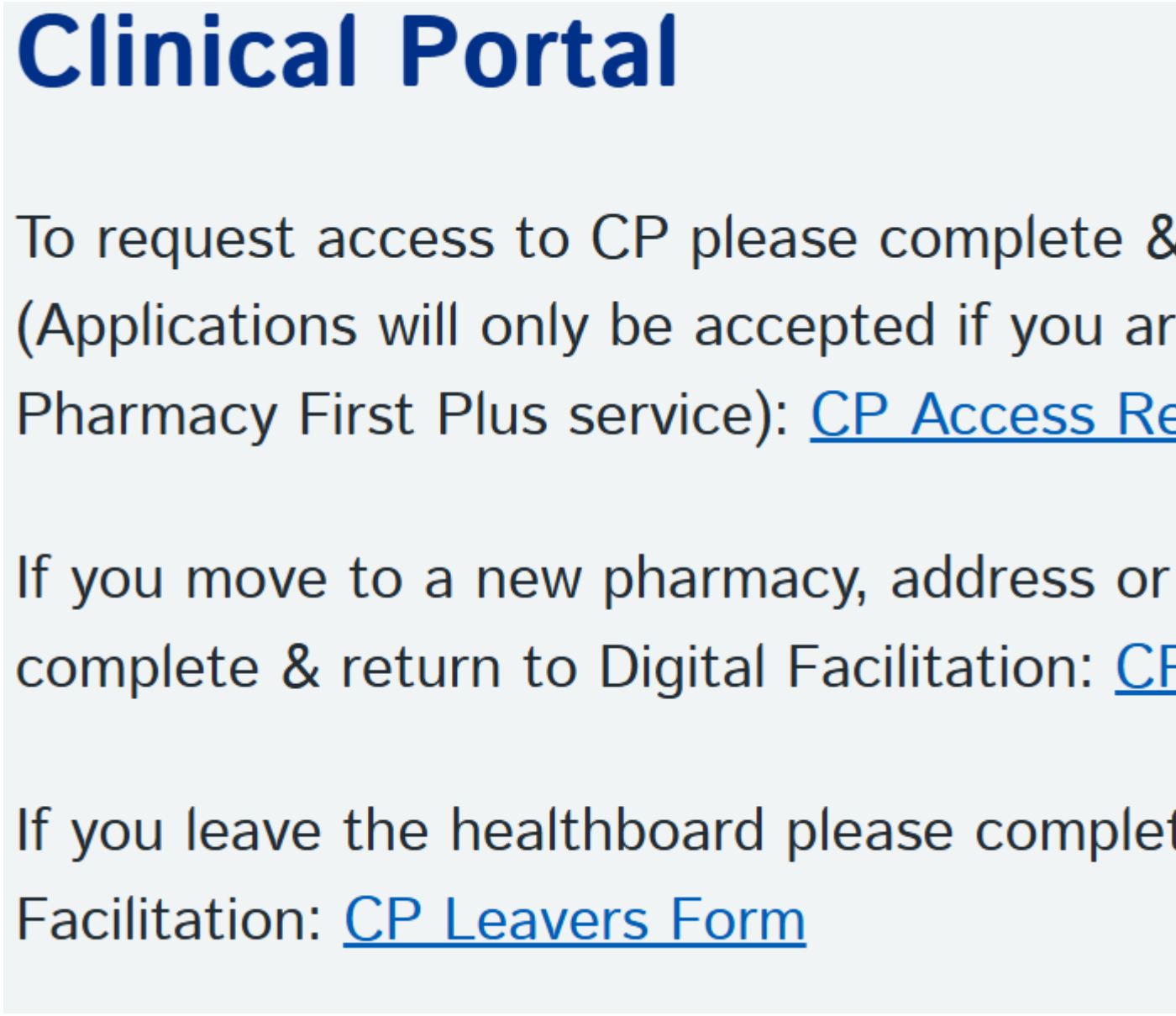
FNC – Demi – Louise Gallon:
UHH H@H - Mari Ward:
UHM H@H - Laura Anne Simpson:
UHW H@H - Jennifer Burdett:
OOHs: Kymberly Robertson:

Have you notified the NHS Lanarkshire Pharmacy Admin team of any changes to your Pharmacy First Plus workplace/practice or if you leave the organisation?

- If you move to another contractor code within NHS Lanarkshire you must notify Pharmacy Admin of the new contractor code to ensure the IP organisational data base is accurate. NHS Facilitation must also be notified to ensure your NHS mailbox, Clinical Portal and Emergency Care Summary access reflects this.
- If you move to another sector of practice and/or another health board, you must notify Pharmacy Admin and destroy any prescribing pads issued by the health board (an email from your line manager confirming pads have been shredded and disposed

of into confidential waste is sufficient). Similarly, any prescriber joining the health board must apply for an NHS Lanarkshire prescribing number and must not use any other number issued by previous healthboards. NHS Facilitation must also be notified to ensure your NHS mailbox, Clinical Portal and Emergency Care Summary access reflects this.

How to apply for ECS and/or Clinical Portal or update your details?
The Community Pharmacy Webpage has been updated to include Access request, Change in Practice and Leavers Forms for the ECS and Clinical Portal: [Digital – NHS Lanarkshire]



Community Pharmacy
NHS Lanarkshire
1st June Update

Do you offer the Opioid Replacement Service? Please remember Standard 1 of the MAT Standards includes 'All people accessing services have the option to start MAT from the same day of presentation'. We have had an increase in community pharmacies turning patients away / asking them to return the following day. Delaying access to treatment may increase the risk of the person dropping out of treatment/losing motivation to start their treatment plan.

Do you offer the Pharmacy First Plus service? Please find attached Pharmacy First Plus newsletter covering January prescribing data. Attached within the newsletter is some professional practice points to consider when delivering the service including chaperone policies, remote consultations, prescribing & dispensing, prescribing at the request of others, prescribing for family & friends and NSS prescription security. Please remember the Pharmacy First Plus service is for delivering Advice, Treatment or Referral in response to symptoms of a Common Clinical Condition**. Is it not for rectifying any rejected items from your CP e-schedules.**

Looking to undertake some CPD? NES have launched a womens health module CPD Women's Health Modules - Woman's Health Hub | Turas | Learn as well as uploaded a recording of their recent Women's Health and HRT Webinar Recording - Womens Health and HRT Interactive Webinar Recording | Turas | Learn

Update on the Consultant Connect pilot? As you are aware we launched Consultant Connect 4 weeks ago, supporting Community Pharmacy teams with clinical decisions and navigation of patients in hours when the P2P line isn't available. 14 sites were selected as pilot sites with a number of patients successfully being issued scripts, specialist appointments and self help advice. All calls were answered within 1-2 minutes, direct to a consultant. **The pilot will expand to a further 15 sites over the coming weeks.** Please keep an eye on your clinical mailboxes for more details. Each site will be shared an individual Consultant Connect contact number, specific to your site and so it is important you save a copy of this! If you missed the last comms about Consultant Connect, please see below:

The Consultant Connect pilot has launched! Our pharmacy teams regularly use the P2P line during the OOHs period to support patients access to care…but what support is available to our teams and patients in hours? **Consultant Connect** is available in hours.

What is Consultant Connect?
Consultant Connect is a professional-to-professional advice line (not for public use) providing Community Pharmacists with direct access to a **senior clinical decision** maker during core hours. This is a **local line operated by clinicians in Lanarkshire.** This line is currently available to a number of healthcare professionals including GPs, Ambulance and Hospital at Home.

Why do we need Consultant Connect?
Better navigation of patients both in hours and out of hours reduces pressures on A&E departments, allowing them to focus their care on those that truly need it. Consultant Connect supports same-day patient navigation within the community and aims to improve patient flow while reducing avoidable pressure on A&E and NHS 24.

How does this differ from the P2P line?

Consultant Connect	P2P
Not available weekends/bank holidays	Available weekends/bank holidays
Operates 8am – 6pm	Operates 6pm – 8am
Direct line to a clinician	Direct line to a non-clinical call handler
Outcome communicated directly during initial phone call unless further assessment needed, in which case the clinician will contact the patient directly within 1 hour	Non-clinical call handler transfer details to a dashboard. Dashboard actioned within two hours. Clinician calls the pharmacy back re outcome/further discussion. P2P may contact patient if specified.

When should I use Consultant Connect?
Similar to the P2P line, Consultant Connect can be used for when:

- A patient requires **same-day urgent care** that is not life threatening
- A patient falls out with a PGD
- A Pharmacist requires clinical advice to support Independent Prescribing
- A patient has been assessed by the CP as needing a **same day GP appointment** but no appointments are available and/or GP does not offer same day appointments. If the patient requires a routine and/or non-urgent appointment they should be directed to contact their own GP.
- A patient may have otherwise attended A&E for an non-life-threatening condition

What outcomes can I expect from Consultant Connect?

Outcomes will be determined by clinical need and may include advice, prescription, or onward referral as appropriate.
If further assessment is required:

- Consultant Connect will contact the patient directly within 1 hour
- The patient does not need to remain on the premises however they may need to return if a script is issued

When will Consultant Connect be rolled out?
The Consultant Connect pilot launched in May and is being piloted with 14 Community Pharmacy sites. We anticipate access to this line to be rolled out to the wider network over a 3 month period, starting with sites who have higher referral data.

Is there any support materials available?
We are hoping to produce a leaflet shortly however in the meantime why not hear from the FNC team directly
https://vimeo.com/1122156678/414845bbee?fl=pl&fe=sh

Are you up to date with the West of Scotland Regional Formulary Chapters? We hope to inform as many prescribers and pharmacy team members as possible of this update. Following the launch of the adult Gastro-intestinal and Respiratory chapters on 15th April, we are pleased to be able to launch two more chapters of the regional formulary. The Cardiovascular and Skin recommendations were added to the formulary website and mobile app on 27th May. Skin is the first chapter to offer both adult and paediatric recommendations. Unlike traditional BNF style lists, the new formulary uses a condition based structure, aligning medicine choices directly with patient care pathways. Clear sections highlight Adult, Child and Pharmacy First recommendations, making it quicker and easier for staff to find clinically relevant guidance. The formulary is available via a new website at formulary.nhs.scot/west, featuring intuitive navigation, a smart search function, and quick links to resources such as the BNF, SPCs and SMC advice. Access is also available through the NHS Scotland Formulary mobile app, which can be used offline. Local formularies remain available for chapters not yet launched regionally. **The WoS newsletter attached includes information on how you can get involved with the development of future chapters.**

Are you prepared for the June public holiday? Please see attached guidance from the OOHs team detailing areas they can/can't support in as well as information they need you to provide during your P2P call.

Attached is also a list of pharmacies closed over the public holiday, please ensure you sign post patients to their nearest CP opened over the public holiday.

Looking to undertake Children, Young People or Adult protection and safe guarding courses? Please see attached Public Protection sessions open to the CP network.

NHSL Public Protection Service Newsletter

Working Together to Protect Children, Young People and Adults at Risk of Harm

Go to this Sway